



File Number: \_\_\_\_\_

**TALBOT COUNTY OFFICE OF PLANNING & ZONING**

**SKETCH APPLICATION FOR MINOR & MAJOR REVISION PLAT**  
**OFFICE USE ONLY:**

Fee Paid: \_\_\_\_\_ Application Received – Date: \_\_\_\_\_ Time: \_\_\_\_\_

T.A.C. Date: \_\_\_\_\_ Planning Commission Date: \_\_\_\_\_ C.R.M. Date: \_\_\_\_\_

Critical Area: \_\_\_\_\_ Forest Conservation Plan: \_\_\_\_\_

**Minor Revision Plat:** \_\_\_\_\_  
**Major Revision Plat:** \_\_\_\_\_

Property Owner #1: \_\_\_\_\_

Address of Owner: \_\_\_\_\_

Telephone Number(s): \_\_\_\_\_

Tax Map: \_\_\_\_\_ Grid: \_\_\_\_\_ Parcel: \_\_\_\_\_ Lot: \_\_\_\_\_ Size: \_\_\_\_\_ Zone: \_\_\_\_\_

Agent/Contact Person: \_\_\_\_\_

Telephone Number(s) of Agent/Contact Person: \_\_\_\_\_

\*\*\*\*\*

Property Owner #2: \_\_\_\_\_

Address of Owner: \_\_\_\_\_

Telephone Number(s): \_\_\_\_\_

Tax Map: \_\_\_\_\_ Grid: \_\_\_\_\_ Parcel: \_\_\_\_\_ Lot: \_\_\_\_\_ Size: \_\_\_\_\_ Zone: \_\_\_\_\_

Agent/Contact Person: \_\_\_\_\_

Telephone Number(s) of Agent/Contact Person: \_\_\_\_\_

\*\*\*\*\*

\_\_\_\_ *Check if and note additional information for additional properties on separate attachment or reverse side.*

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

Project Road Frontage - Existing: State: \_\_\_\_\_ County: \_\_\_\_\_ Private: \_\_\_\_\_

Proposed: State: \_\_\_\_\_ County: \_\_\_\_\_ Private: \_\_\_\_\_

List Historical Significance/Impacts: \_\_\_\_\_

Within Town Growth Area: Y / N Critical Area: Y / N RDR: \_\_\_\_\_ ac. Reserved Land: \_\_\_\_\_ ac.

Property #1: Water: Community: \_\_\_\_\_ Individual: \_\_\_\_\_ Sewer: Community: \_\_\_\_\_ Individual: \_\_\_\_\_  
Property #2: Water: Community: \_\_\_\_\_ Individual: \_\_\_\_\_ Sewer: Community: \_\_\_\_\_ Individual: \_\_\_\_\_

**REGISTERED ENGINEER OR SURVEYOR:**

Company Name: \_\_\_\_\_

Representative: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number(s): \_\_\_\_\_ Fax Number: \_\_\_\_\_

**IMPORTANT: APPLICATIONS ON WHICH ALL REQUIRED INFORMATION IS NOT FURNISHED WILL BE RETURNED FOR  
COMPLETION BEFORE PROCESSING, AND SHALL NOT BE CONSIDERED FILED WITH THIS DEPARTMENT.**

Revised: 9/28/09



File Number: \_\_\_\_\_

**REQUIREMENTS OF SKETCH REVISED PLAT APPLICATION**

All Applications listed above must complete and submit the following for Minor & Major projects. A local jurisdiction may not approve a proposed parcel or lot consolidation or reconfiguration unless the local jurisdiction makes written findings that:

- \_\_\_\_\_ 1. Application fee as determined by fee schedule adopted by County Council.
- \_\_\_\_\_ 2. Ten (10) paper copies of revised plat represented at a size of not more than 100 feet per inch.
- \_\_\_\_\_ 3. Five (5) copies of all approved and recorded deeds approved for the properties to be revised.
- \_\_\_\_\_ 4. Five (5) copies of all plats of record for the subject lands. All plat information shall be legible.
- \_\_\_\_\_ 5. Five (5) copies of all recorded deeds of easements, covenants, and/or maintenance agreements pertaining to the subject lands.
- \_\_\_\_\_ 6. A written listing and description of all approved or recorded subdivisions and revision activity for the subject lands.
- \_\_\_\_\_ 7. A written detailed description explaining the specific circumstance(s) of the proposed revision.
- \_\_\_\_\_ 8. A copy of the application for a joint Federal/State permit(s) if initial indications are that alterations of floodplains, waterways, and/or wetlands may occur.
- \_\_\_\_\_ 9. Please complete the adjacent property owner's worksheet and pay the associated postage fees required. **(Major Projects Only)**

**\*\*PLEASE PROVIDE A WRITTEN DETAILED DESCRIPTION OF 9-14:\*\***

- \_\_\_\_\_ 10. The proposed consolidation or reconfiguration will result in no greater number of lots, parcels, or dwelling units in the Critical Area than the configuration in existence at the time of application would allow.
- \_\_\_\_\_ 11. In the Limited Development Area or Resource Conservation Area, the proposed consolidation or reconfiguration:
  - \_\_\_\_\_ (a): Will result in no greater lot coverage than development activities within the configuration in existence at the time of application will allow; and
  - \_\_\_\_\_ (b): Will result in no greater impact to a steep slope than development activities within the lot configuration in existence at the time of application will allow, if that steep slope is located outside the Buffer or expanded Buffer;
- \_\_\_\_\_ 12. The proposed consolidation or reconfiguration does not:
  - \_\_\_\_\_ (a): Create an additional riparian parcel or lot, waterfront lot, or any other parcel or lot deed with water access; or
  - \_\_\_\_\_ (b): Intensify or increase impacts associated with riparian access;
- \_\_\_\_\_ 13. The proposed consolidation or reconfiguration does not create:
  - \_\_\_\_\_ (a): A parcel, lot, or portion of a parcel or lot that will serve development activities outside the Critical Area; or
  - \_\_\_\_\_ (b): A Resource Conservation Area parcel or lot that serves development activities in the Intensely Developed Area or Limited Development Area;
- \_\_\_\_\_ 14. The proposed consolidation or reconfiguration identifies each Habitat Protection Area on

site:

- \_\_\_\_\_ (a): If the proposed consolidation or reconfiguration impacts a Habitat Protection Area, the proposed protective measures and restoration measure will provide for the least possible adverse impact; and
- \_\_\_\_\_ (b): The proposed consolidation or reconfiguration:
- \_\_\_\_\_ (i): Results in no greater impact to a Habitat Protection Area than the impact that would result from development activities within the configuration in existence at the time of application; and
- \_\_\_\_\_ (ii): Minimizes adverse impacts to the Habitat Protection Area;
- \_\_\_\_\_ 15. The proposed consolidation or reconfiguration fully complies with the afforestation and reforestation requirement in COMAR 27.01.05 and 27.01.09, unless clearing is necessary to avoid a Habitat Protection Area.
- \_\_\_\_\_ 16. Completed checklist addressing all requirements for Sketch Revision Plat submittal.

**APPLICANT FAILURE TO ADEQUATELY ADDRESS ALL APPLICATION AND CHECKLIST ITEMS AND THOSE SPECIFICATIONS IN ACCORDANCE WITH CHAPTER 190 OF THE TALBOT COUNTY CODE, MAY RESULT IN A PROJECT BEING CONSIDERED INCOMPLETE OR INACCURATE, ANY SUCH DEFICIENCIES MAY RESULT IN RETURN OF APPLICATION WITHOUT PROCEEDING THROUGH THE REVIEW PROCESS.**

\_\_\_\_\_  
Applicant's Signature- Property #1

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature- Property #2

\_\_\_\_\_  
Date

**AS A MARYLAND REGISTERED DESIGN PROFESSIONAL/SURVEYOR I HEREBY CERTIFY THAT THIS APPLICATION AND ASSOCIATED PLAN(S) ARE TECHNICALLY CORRECT AND ACCURATE TO THE EXTENT NECESSARY FOR MEETING TALBOT COUNTY REQUIREMENTS FOR PRELIMINARY-FINAL REVISION PLAT SUBMISSION.**

\_\_\_\_\_  
Signature of MD Registered  
Design Professional/Surveyor

\_\_\_\_\_  
Date

***PLATS CAN NOT BE RECORDED UNTIL FINAL APPROVAL HAS BEEN GRANTED***

Revised: 9/28/09



File Number: \_\_\_\_\_

## TALBOT COUNTY OFFICE OF PLANNING & ZONING

### **SKETCH APPLICATION FOR MINOR & MAJOR REVISION PLAT**

Surveyor: \_\_\_\_\_

Checklist completed by: \_\_\_\_\_

Plat reviewed by: \_\_\_\_\_

The Surveyor will review each plat submission & application for completeness and accuracy.  
Each item shall be reviewed and checked as follows:

- Y = Information Complete and Accurate
- N/A= Information Not Applicable
- W = Waiver of required information. Submit separate request in writing to Planning Officer.

### **REQUIRED REVISION PLAT NOTATIONS AND INFORMATION**

Based on unique characteristics of each parcel the Technical Advisory Committee may require additional information be submitted.

#### **(Check 1 - 26 for Sketch)**

- \_\_\_\_\_ 1. Name of subdivision if applicable.
- \_\_\_\_\_ 2. Name, address and telephone number of property owners and/or contract purchaser, if applicable.
- \_\_\_\_\_ 3. Deed reference of property. Last recorded plat reference.
- \_\_\_\_\_ 4. Deed reference for any recorded right-of-ways or easements on property including existing covenants and road maintenance agreements.
- \_\_\_\_\_ 5. Name, address and telephone number of any consultants/professionals used to prepare the plat.
- \_\_\_\_\_ 6. Tax Map, Grid and Parcel numbers to be included in title block for each parcel.
- \_\_\_\_\_ 7. Zoning district designation and minimum lot size.
- \_\_\_\_\_ 8. Required building/development setbacks applicable to the subject lands including:
  - \_\_\_\_\_ Property setbacks from State Highways
  - \_\_\_\_\_ Special setbacks from State Highways
  - \_\_\_\_\_ Shoreline development buffer/tidal wetland buffer
  - \_\_\_\_\_ Non-tidal wetland buffer
  - \_\_\_\_\_ Stream setbacks
  - \_\_\_\_\_ Perimeter agricultural buffer
  - \_\_\_\_\_ 20 foot Sewage Disposal Area buffer
  - \_\_\_\_\_ Non-tidal wetland buffer
- \_\_\_\_\_ 9. Calculation of development rights permitted, utilized and remaining for future use on each

- lot.
- \_\_\_\_\_ 10. Area calculations for each lot/parcel:
    - \_\_\_\_\_ Property size before revision
    - \_\_\_\_\_ Property size after revision
    - \_\_\_\_\_ Area in roads and rights of way
    - \_\_\_\_\_ Area of open space, remaining lands, etc.
    - \_\_\_\_\_ Area protected by Reservation of Development Rights
    - \_\_\_\_\_ Area of Chesapeake Bay Critical Area
    - \_\_\_\_\_ Area of forest; both inside and outside Critical Area
    - \_\_\_\_\_ Area of state/private tidal wetlands
  - \_\_\_\_\_ 11. Month, Day and Year of plan preparation and latest plan revision with brief revision description.
  - \_\_\_\_\_ 12. Vicinity map at a scale of not more than 1" = 2,000'.
  - \_\_\_\_\_ 13. Graphic Scale for plan view and vicinity map.
  - \_\_\_\_\_ 14. North Arrow for plan view and vicinity map.
  - \_\_\_\_\_ 15. Location of existing property lines, lengths and bearings, easements and right-of-ways. An overview or outline inset may be necessary for larger parcels.
  - \_\_\_\_\_ 16. Location of zoning district lines and Chesapeake Critical Area boundary, if applicable.
  - \_\_\_\_\_ 17. Location and use of existing buildings, structures and burial grounds with access and notation of buildings or sites with historical and/or architectural significance.
  - \_\_\_\_\_ 18. Location of existing agriculture buildings, agricultural lands/fields/watercourses, wetlands (tidal and nontidal), forests, wooded areas, hedgerows, individual standing mature trees, 100 year floodplains, habitats of threatened and endangered species, steep slopes, significantly eroding shorelines and other significant natural features of the site identified from available mapping sources and general field observations.
  - \_\_\_\_\_ 19. Approximate existing topography and approximate existing drainage pattern identified from available mapping sources and general field observations.
  - \_\_\_\_\_ 20. Location, width, name and type of all existing roads or rights-of way within or immediately adjacent to the site.
  - \_\_\_\_\_ 21. Location of property lines and ownership and deed information for all tracts or parcels adjacent to any perimeter boundary of the subject lands.
  - \_\_\_\_\_ 22. Location of proposed road and right-of-way locations. (All proposed lots must meet the mandatory road frontage requirements.)
  - \_\_\_\_\_ 23. Proposed lot layout and proposed location of lot lines including lot dimensions and lot size.
  - \_\_\_\_\_ 24. Proposed well and Sewage Disposal Area locations and/or existing well with tag number, components of septic systems and Sewage Disposal Areas and/or public water and sewer facilities where applicable.
  - \_\_\_\_\_ 25. Proposed location, dimensions and size of lands to be designated for community open space, public use, public dedication reserved open space, remaining lands for future development, etc.
  - \_\_\_\_\_ 26. Location features such as; lot corners, SDAs, access points, etc, which could not otherwise be easily located on the site.

**APPLICANT FAILURE TO ADEQUATELY ADDRESS ALL APPLICATION AND CHECKLIST ITEMS, AND THOSE SPECIFICATIONS IN ACCORDANCE WITH CHAPTER 190 OF THE TALBOT COUNTY CODE, MAY RESULT IN A PROJECT BEING CONSIDERED INCOMPLETE OR INACCURATE, ANY SUCH DEFICIENCIES MAY RESULT IN RETURN OF APPLICATION WITHOUT PROCEEDING TO THE NEXT LEVEL OF REVIEW. ONLY THAT INFORMATION SUBMITTED WITH THE ORIGINAL APPLICATION AND IN COMPLIANCE WITH SUBMITTAL DEADLINES WILL BE REVIEWED BY THE TECHNICAL ADVISORY COMMITTEE.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**I HEREBY CERTIFY THAT THIS CHECKLIST AND ASSOCIATED PLAN ARE  
TECHNICALLY CORRECT AND ACCURATE TO THE EXTENT NECESSARY FOR  
MEETING TALBOT COUNTY REQUIREMENTS FOR REVISION PLAT  
SUBMISSION.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

Revised: 9/28/09

***PLEASE PRINT OR WRITE LEGIBLY***

**Detailed Directions to Applicant's Property:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



File Number: \_\_\_\_\_

Talbot County Office of Planning and Zoning  
215 Bay Street, Suite 2  
Easton, Maryland 21601  
410-770-8030

**Independent Procedures Disclosure and Acknowledgement Form**

Proposed Project Name: \_\_\_\_\_  
Physical Address of Property: \_\_\_\_\_  
Tax Map: \_\_\_\_\_ Grid: \_\_\_\_\_ Parcel: \_\_\_\_\_ Lot: \_\_\_\_\_ Zone: \_\_\_\_\_  
Name of Applicant: \_\_\_\_\_  
Phone Number(s): \_\_\_\_\_  
Applicant Agent: \_\_\_\_\_  
Phone Number(s): \_\_\_\_\_  
Property Owner: \_\_\_\_\_  
Phone Number(s): \_\_\_\_\_

Applicant acknowledges and understands:

1. This Application may be subject to local, state and federal laws, Ordinances, rules, or regulations (hereafter "Laws") other than those that the Office of Planning & Zoning or Board of Appeals reviews, administers, or applies in connection with this review.
2. Other agencies, including but not limited to the Talbot County Health Department, Division of Environmental Health, Maryland Department of the Environment, U.S. Army Corps of Engineers, Maryland Department of Natural Resources, US Fish and Wildlife Service and others may also have review authority over the project or development proposed in the application.
3. Applicant remains solely responsible for compliance with all applicable laws, ordinances, rules, or regulations.
4. Applicant understands that review of this Application does not necessarily include review of any other applicable laws.
5. Applicant understands that neither the Office of Planning & Zoning nor any of its employees has authority to grant permission or approval of any project or proposed development that violates any applicable law, ordinance, rule, or regulation of Talbot County, Maryland, and that any such approval issued in error has no enforceable legal effect.



6. Applicant understands that any decision issued by the Office of Planning & Zoning or by the Board of Appeals does not necessarily guarantee or assure the applicant that this project or proposed development may proceed.

I HEREBY CERTIFY that I have read, acknowledge, and understand the foregoing.

\_\_\_\_\_ (SEAL)

Applicant

\_\_\_\_\_ (SEAL)

Applicant/Agent

*For Office Use Only:* Date Received: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_